

Learn-To-Skate: Summer 2017

Registration Form

*Our Learn-To-Skate Program will help you build confidence and teach you the FUN-damentals of skating.
Learn-To-Skate is open to all ages and all ability levels, including Tiny Tots, and Adults!*

Classes are 30 Minutes in length and are offered in 6-week sessions with a free Bridge Activity the 7th Tuesday of every session. Each student also receives FREE skate rental for the duration of the session, six FREE practice coupons (basic levels only), a USFSA Skills Record Book, a patch for each level passed and a Certificate! Bring a Buddy for free on the **FIRST** day of class.

Cost: Entry classes (Snowplow 1-3 & Basic 1-4) \$40 per 6-week session. Includes Skate Rental for all classes & practices when using your 6 session practice punch card provided at check-in.

Basic 5 and Above: \$55

Wasatch Figure Skating Club members: \$45

<u>Wed 6/7-7/12</u> Free Bridge Activity: 7/19 5:30-6:00	<u>Wed 7/26-8/30:</u>
<u>5:30-6:00</u> Snowplow 1 Snowplow 2 Snowplow 3 Basic 1 Basic 2	<u>5:30-6:00</u> Snowplow 1 Snowplow 2 Snowplow 3 Basic 1 Basic 2
<u>6:15-6:45</u> Basic 3 Basic 4 Basic 5 Basic 6 Basic 7 Basic 8 Freeskate 1 Freeskate 2 Freeskate 3 Freeskate 4 Freeskate 5 Freeskate 6 Adults Social Needs	<u>6:15-6:45</u> Basic 3 Basic 4 Basic 5 Basic 6 Basic 7 Basic 8 Freeskate 1 Freeskate 2 Freeskate 3 Freeskate 4 Freeskate 5 Freeskate 6 Adults Special Needs

Beginners:

*Ages 3-5 should register for Snowplow 1.
Ages 6 and up should register for Basic 1.
Adults should register for the Adult Class.*

FIRST DAY OF CLASS:

GLOVES!
Long Pants
Jacket or Sweatshirt
Long Socks
A helmet (if desired)

❖ *Please arrive at least 20 minutes early on the first day to ensure that the registration process runs smoothly and you allow yourself enough time to find the proper size and fitting for your skates.*

❖ For more information please call 778-6360, 778-6300, or email mrollins@co.weber.ut.us

PLEASE CUT OFF THE BOTTOM PORTION OF THIS FORM AND RETURN IT TO THE ICE SHEET FRONT DESK WITH FULL PAYMENT BEFORE THE 1ST DAY OF CLASSES. *PLEASE RECORD THE DAY AND TIME OF YOUR PREFERRED CLASS AND KEEP THE TOP PORTION OF THIS FORM FOR YOUR RECORDS.

Name: _____ Age: _____ School: _____

Parent/Emergency Contact: _____

Phone: _____ Email: _____

Address: _____ City: _____ Zip: _____

CLASS PREFERENCE: (Please specify your preference based on the offered classes above.)

LEVEL: _____

Learn-To-Skate Participation Agreement.

I, _____ (print name), hereby agree to the following conditions:

- ❖ Refunds will NOT be given after the first day of class. (Please consult the Office Manager.)
- ❖ Classes may be combined at the discretion of The Ice Sheet.
- ❖ I will not hold The Ice Sheet, or any its affiliates, staff, volunteers, and/or coaches liable for mine or my child's injury while participating in the Learn-To-Skate program.
- ❖ I understand that I will not be enrolled in classes until my payment is received IN FULL.
- ❖ I understand that my registration may be deferred to the next session if the requested class is at capacity.
- ❖ I understand that due to the nature of the Learn-To-Skate program, I CANNOT request a specific coach.

Signature _____

Date _____